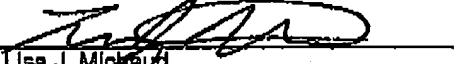


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NO. 706 P.1

MAY 11 2005

AMENDMENT TRANSMITTAL LETTER				Docket No. 104934-0002	
Application No. 10/608,852-Conf. #8742	Filing Date June 27, 2003	Examiner C. Bottorff	Art Unit 3618		
Applicant(s): Keith M. Orr, Gordon Hay, and Edward Kunkel					
Invention: RECREATIONAL BINDING WITH ADJUSTABLE SUSPENSION INTERFACE					
TO THE COMMISSIONER FOR PATENTS					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	39	- 41 =	0	x 25.00	0
Independent Claims	6	- 5 =	1	x 100.00	100.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:				100.00	
<input type="checkbox"/> Large Entity				<input checked="" type="checkbox"/> Small Entity	
<input type="checkbox"/> No additional fee is required for this amendment.					
<input checked="" type="checkbox"/> Please charge Deposit Account No. 141449	in the amount of \$ 100.00				
A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. 141449					
as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
 Lisa J. Michaud Attorney Reg. No.: 44,238					
Dated: May 11, 2005					
RECEIVED MAY 13 2005 DPE/JCWS					
<p style="margin: 0;">Amendment Transmittal</p> <p>I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, facsimile no (703) 872-9306, on the date shown below.</p> <p>Dated: May 11, 2005 Signature:  (Lisa J. Michaud)</p>					

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MAY 11 2005

PTO/SB/17 (12-04v2)

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*Effective on 12/08/2004,
Fee pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).*

**FEE TRANSMITTAL
For FY 2005**

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 100.00)

Complete if Known

Application Number	10/608,862-Conf. #8742
Filing Date	June 27, 2003
First Named Inventor	Keith M. Orr
Examiner Name	C. Bottroff
Art Unit	3618
Attorney Docket No.	104934-0002

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order Name: _____ Other (please identify): _____

Deposit Account Deposit Account Number: 141449 Deposit Account Name: Nutter McClellan & Fish LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES	
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)
Utility	300	150	500	250	200	100
Design	200	100	100	50	130	65
Plant	200	100	300	150	160	80
Reissue	300	150	500	250	600	300
Provisional	200	100	0	0	0	0

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues)

Fee (\$)	Fee (\$)
50	25
200	100
360	180

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
39	41	0	=			
6	6	1	x 100.00 = \$100.00			

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(c)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(a).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
	- 100 = /50	(round up to a whole number) x		=

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): _____

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	44,238	Telephone	(617) 439-2000
Name (Print/Type)	Lisa J. Michaud			Date	May 11, 2005

Fee Transmittal

I hereby certify that this correspondence is being deposited via facsimile no. (703) 872-9308 to: MS Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date set forth below.

Dated: May 11, 2005

Signature:  (Lisa J. Michaud)

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MAY 11 2005

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s) : Keith M. Orr
Application No. : 10/608,852
Filing Date : June 27, 2003
Entitled : RECREATIONAL BINDING WITH
ADJUSTABLE SUSPENSION
Atty. Docket No. : 104934-2

Group Art Unit: 3618

Examiner: C. Bottorff

Certificate of Facsimile (37 C.F.R. 1.8(a))

I hereby certify that this correspondence is being deposited via facsimile no. (703) 872-9306 to: MS Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date set forth below.

May 11, 2005

By:

Date of Signature and Mail Deposit

Lisa J. Michaud, Reg. No: 44,238
Attorney for Applicant(s)

MS Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT AND RESPONSE

Dear Sir:

Applicants submit this paper in response to the Office Action dated April 5, 2005.

Amendments to the Claims being on page 2 of this paper.

Remarks being on page 6 of this paper.

05/13/2005 JBALINAN 00000060 141449 10608852

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